

Questionnaire "Individual pad printing training course"

FAX + 49 7150 928-400 / mailto:seminar@tampoprint.de

Contact Details*

Company Name _____ Contact Person _____

Sector _____ Position _____

Street _____ Phone _____

Postal Code _____ Fax _____

City _____ Mobile _____

Country _____ E-Mail _____

Internet _____

Customer number

Machine order number before 2004 M-

Machine order number since 2004 VAM-

Accessories order number VAZ-

Serial machine number (A.T.)

Machine type

Machine type

We need the following information from you

Printing technology

Pad printing machine in use since _____

Pad printing automation in use since _____

Ink type: _____ e.g. TP-PP, RDF-HF, LOGO

Ink shade: _____ e.g. black, white, citron yellow, silver,

Cliché type: _____ e.g. Magnet-Screen cliché, Ceramic cliché

Pad Art.No.: _____ e.g. 08 43 97

Application field / Intended use

Which material will be printed?
 (e.g. polystyrol, PMMA, glass) _____

What will be printed?
 (e.g. promotional items, car parts, packagings) _____

Which feature of the material to printed has to be fulfilled?
 (e.g. resistance against substances) _____

Notes (e.g. main topic of the "Individual pad printing training course")

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Date _____ Place _____ Signature customer / Stamp _____